

The 2nd Leading Cancer Killer

Colorectal cancer is the 2nd leading cancer killer in the U.S. But if everyone age 50 or older had regular screening tests, at least one third of deaths from this disease could be avoided.

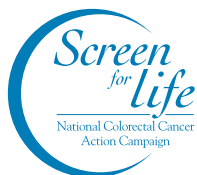
Screening Saves Lives

If you're 50 or older, getting a screening test for colorectal cancer could save your life. Here's how:

- Colorectal cancer usually starts from polyps in the colon or rectum. A polyp is a growth that shouldn't be there.



- Over time, some polyps can turn into cancer.
- Screening can find polyps, so they can be removed before they turn into cancer.
- Screening can also find this cancer early, when the chance of being cured is good.



To find out about Medicare coverage, call **1-800-MEDICARE (1-800-633-4227)**.

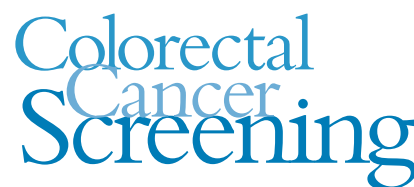
For **TTY** call **1-877-486-2048**.

Or visit **www.medicare.gov**.

For more information about colorectal cancer, visit **www.cdc.gov/cancer/ScreenforLife**.

Or call the National Cancer Institute's Cancer Information Service at **1-800-4-CANCER**.

For **TTY** call **1-800-332-8615**.

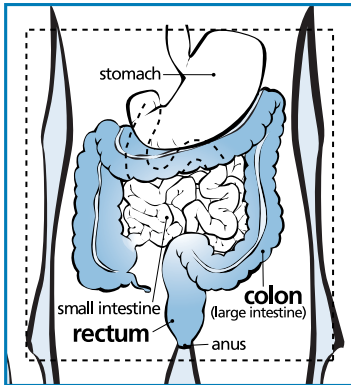


FOR PEOPLE WITH MEDICARE



What Is Colorectal Cancer?

Colorectal cancer (often called *colon cancer*) is cancer that occurs in the colon or rectum. The colon is the large intestine or large bowel.



The rectum is the passageway connecting the colon to the anus.

Who Gets Colorectal Cancer?

Colorectal cancer occurs most often in men and women of any racial or ethnic group who are age 50 and older. The risk increases with age. Your risk may be higher than average if you or a close relative have had colorectal polyps or colorectal cancer or if you have inflammatory bowel disease. Speak with your doctor about when to start screening if you think you're at high risk.

What Are The Symptoms?

Polyps and colorectal cancer don't always cause symptoms, especially at first. But if there are symptoms, they may include the following:

- Blood in or on your stool.
- Stomach aches, pains, or cramps that happen a lot and you don't know why.

- A change in bowel habits, such as having stools that are thinner than usual.
- Losing weight and you don't know why.

These symptoms may be caused by something other than cancer. But the only way to know the cause is to see your doctor.

Types Of Screening Tests

Several tests can be used to detect polyps or colorectal cancer. Each can be used alone. Sometimes they are used in combination with each other. People 50 years or older with Medicare are eligible for colorectal cancer screening. **Medicare helps pay for these tests:**

Fecal Occult Blood Test or Stool Test—

A test you do at home using a kit from your health care provider. You put stool samples on test cards and return the cards to the doctor or a lab, to be checked for hidden (occult) blood in the stool.

- **Medicare:** Covers once a year.
- **You Pay:** Nothing

Flexible Sigmoidoscopy—The doctor puts a short, thin, flexible, lighted tube into your rectum, to check for polyps or cancer in the rectum and lower third of the colon. Sometimes this is used in combination with the stool test.

- **Medicare:** Covers every 4 years.
- **You Pay:** 20% of Medicare approved amount after yearly Part B deductible.*

Colonoscopy—This is similar to flexible sigmoidoscopy, except the doctor uses a longer tube to check for polyps or cancer in the rectum and the entire colon.

During the test, the doctor can find and remove most polyps and some cancers.

- **Medicare:** Covers every 10 years if you are not at high risk for colorectal cancer, but not within 4 years of having screening flexible sigmoidoscopy. Covers every 2 years if you are at high risk. Medicare also covers follow-up colonoscopy if results of another screening test are abnormal. There is no age limit for colonoscopy.
- **You Pay:** 20% of Medicare approved amount after yearly Part B deductible.*

Barium Enema—You have an enema with a liquid called barium, then the doctor takes x-rays of your colon. The barium allows the doctor to see the outline of your colon to check for abnormalities.

- **Medicare:** If your doctor orders this as a substitute for flexible sigmoidoscopy or colonoscopy, it is covered every 4 years if you are not at high risk, and every 2 years if you are at high risk for colorectal cancer.
- **You Pay:** 20% of Medicare approved amount after yearly Part B deductible.

* If done in an ambulatory surgical center or hospital outpatient department, you pay 25% of Medicare approved amount.